SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES

00 PR	IMARY AND GENERAL EL	ECTIONS			State of Neva
Im	ANSWORTH	SUN VALLE	7 GID		
ındidat	e's Name(print)	Office		District (i)	f applicable)
44	MIDDLEFURK PR.	SUN VALLEY	89437	672.	2985
ailing a	address (include city and zip code)			Telephone I	
	Report Period Began: Deport Period P	December 17, 1994, for an December 21, 1996, for an December 19, 1998, for an open and the Paris of England August 2	office with a something office with a formation of the contraction of	six year term our year term	FILED AUG 2 9 2000 Dean Holer Secretary of State
	Repo	rt Period Ends: August 2	23, 2000		ocordary or otate
of uns	Cash on hand from previou spent contributions report), if any		l the balance sl	nown on your i	last disposition
	CONT	RIBUTIONS SUMMAR	RY		
1. T	Cotal Amount of contributions in ex	cess of \$100			
2. T	Cotal amount of contributions of \$1	00 or less		<i></i>	
A	Actual number of contributions of \$	100 or less			
3. Ir	nterest and income earned, if any			-0	
4. T	OTAL AMOUNT OF ALL CO	NTRIBUTIONS			
	(add lines 1 through 3)				
<u> </u>		EXPENSES SUMM	ARY		
5. T	otal amount of expenses in excess	of \$100			
6. T	otal amount of expenses of \$100 or	r less	₩_	0	
7. E	expense for filing fee		4		
1	OTAL AMOUNT OF ALL EXP	ENSES	1880	,)	
8. T			4		

ith your filing officer.

I declare under penalty of perjury that the foregoing is true and correct.

Prescribed by Secretary of State NRS 294A 120, 294A.200 001(rev 04/00)

Total number of pages for this report

Receipt Date	May 1	2000	19709
RECEIVED FROM Jan C	no/100	4 \$ 30	0.00
FOR Candidate Paid by Acash	Fing 1	INTY REGISTRAR C	NE VOTERS
Check Money Order	By REM	Wards DEPUTY	JE VUIEKS
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din	ANSWERT	Sun	VALLEY	610	
Candida	te's Name (print)		Office'		District (if applicable)

### Contributions in Excess of \$100 or, When Added Together Exceed of \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND

This page may be copied or duplicated if additional space is needed.

PAGE _____ OF ____

Candidate's Name (print)

Candidate's Name (print)

Office

District (if applicable)

#### Contributions of \$100 or Less

DATE OF EACH	AMOUNT OF EACH CONTRIBUTION		DATE. OF EACH CONTRIBUTION	AMOUNT OF EACH
CONTRIBUTION	CONTRIBUTION		CONTRIBUTION	CONTRIBUTION
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Candidate's Name (print) SAN VALLEY

Office

District (if applicable)

### **Expenses Categories**

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	H	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	

PAGE _____ OF ____

1 1	)			
JIM ANSWORL	SUN VALLEY	GID		
Candidate's Name (print)	Office	Distr	ict (if applicable)	

## **Expenses in Excess of \$100**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSES)	CATEGÓRY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
	Town Althought to	Sala managan an salahan sa	
			<u> </u>

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PAGE	OF
11100	O1 .

Jim Answeatt	SUN VALLEY GIZ	
Candidate's Name (print)	Office	District (if applicable)

### Expenses of \$100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY		DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
			<b>Y</b> /			
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